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FROM Thomas M. Isaacson

DATE 2004-09-13 21:59:52 GMT

RE Application No. 09/757,454; Art Unit 2654;

COVER MESSAGE

Dear Sirs:

Please find attached a Response after Final Rejection in the above-referenced case.

Respectfully submitted,

The Law Office of Thomas M. Isaacson
410 414-3056

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

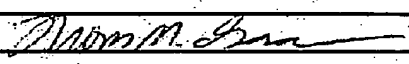
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/757,464	
	Filing Date	01/30/2001	
	First Named Inventor	Narendra K. Gupta et al.	
	Art Unit	2845	
	Examiner Name	Joseph T. Phan	
Total Number of Pages in This Submission	10	Attorney Docket Number	2000-0163

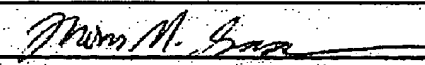
ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Thomas M. Isaacson, Reg. No. 44166
Signature	
Date	September 13, 2004

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Thomas M. Isaacson		
Signature		Date	Sept. 13, 2004

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